### **Asset Management**

#### Charles Y. Davis

Asset Management Officer, Office of Insured Health Care Facilities, HUD



### Regulatory Agreement and Covenants

- 1. Non-Interference By Parent
- Maintenance of Integrity of Collateral and Project
- 3. Reporting Requirements
- 4. Affiliate Transactions
- 5. Corporate Distribution of Assets
- New Corporations, Subsidiaries, and Affiliations, Mergers
- 7. Financial Reports
- 8. Business Plan/Consultant's Report
- 9. Additional Indebtedness and Leasing



### Mortgage Reserve Fund

- Hospital must fund a Mortgage Reserve Fund, held in trust for HUD
- Hospital must execute a MRF Agreement and Trust Agreement
  - Containing most current standard provisions
  - Giving HUD control and direct access to the monies under specified conditions



#### **MRF Purposes**

- To help hospitals through temporary financial crises and provide funds to prevent defaults
- To provide for costs of engaging various consultants as required by the Regulatory Agreement
- To provide additional security to HUD
  - 1 year of debt service to be funded within first 5 years of the mortgage
  - 2 years of debt service must be funded within first 10 years of the mortgage



#### **MRF Investments**

- MRF monies deposited should be invested in interest-bearing securities insured by an agency of the United States Government:
  - Obligations of the US government
  - Obligations for which principal and interest are guaranteed by the US Government
  - Instruments of US Government agencies such as the Federal Home Loan Bank or the Federal Farm Credit Bank
  - Mutual funds that invest solely in the US Treasury obligations
  - Short-term securities that are fully insured or guaranteed by the US Government

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### Weighted Average Maturity of Securities

- The weighted average maturity of all securities held directly by the trustee, a bond, or money market fund:
  - Must be ten years or less
  - Except for investments that were previously in the Depreciation Reserve Fund (DRF)
- Proceeds from former DRF investments that are sold or mature must be reinvested such that the investments in the MRF, excluding former DRF investments, have a weighted average maturity of 10 years or less.

#### Market Value of Investments

- All investments carried at market value
  - If market value is <u>less</u> than the required amount at fiscal year end per audit:
    - Client has 60 days to bring the fund current by not receiving investment income or, if needed, by making a supplemental contribution
  - If market value is <u>more</u> than the required amount at fiscal year end per audit, MRF is fully funded at 2 years of debt service coverage, and financial threshold tests are met:
    - Hospital may receive the excess amount.



#### Requests for MRF Releases/Loans

- All requests for releases or loans shall be presented by the hospital's Account Executive to the HUD Program Management Group (PMG) with an appropriate recommendation
- After evaluation by the PMG, the Account Executive will forward the request for approval and signature to the Director, Office of Insured Health Care Facilities



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### **Priority Watch List**

- Consists of hospitals that present danger of default within the next 12 months
  - Failure to make a mortgage payment by the 15th day of the month in which the payment is due
  - Serious violations of the Regulatory Agreement that jeopardize the mortgage collateral or the hospital's future ability to service the HUD insured mortgage

### Priority Watch List (cont'd)

- Financial criteria requiring immediate assessment of the hospital to determine inclusion on the PWL:
  - **❖**DSC < 1.10
  - ❖OM < 0 for more than 2 consecutive years</p>
  - ❖OM < -4% in any single year</p>
  - ❖ CR < 1.00 and DCOH < 5</p>
  - **♦** A/P > 150
  - A/R > 90
  - DRF < 1.5 years Debt Service and hospital failing to make required deposits</p>



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#### Hospital Mortgage Servicer

- Roles of the Servicer:
  - To represent the Mortgagee in carrying out the terms of the FHA Loan Documents. To act as a liaison between the Mortgagor (Hospital), Mortgagee and HUD.
- Servicer Requirements:
  - Servicer <u>must</u> be a HUD-approved Mortgagee and should have knowledge of the particulars of the deal and the hospital industry

# Servicer Responsibilities During Permanent Loan Servicing

- Collect monthly principal and interest due under the mortgage
- 2. Collect escrows for Mortgage Insurance Premiums (MIP), Hazard Insurance, and municipal charges (water/sewer/real estate taxes)
- 3. Make Annual MIP Payments
- 4. Monitor Hazard Insurance



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# Servicer Responsibilities During Permanent Loan Servicing (cont'd)

- Obtain periodic title reports to be sure there are no liens or new encumbrances
- 6. Monitor UCC filings
  - To ensure the Mortgagee's lien remains intact
  - To note when Hospital is leasing or borrowing
    - Servicer should ensure that the Hospital, when leasing or borrowing, is in compliance with the Regulatory Agreement
- 7. Monitor Letters of Credit (if any)
- 8. Monitor the MRF and report shortfalls to the Account Executive

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# Servicer Responsibilities During Permanent Loan Servicing (cont'd)

- Collect annual, audited financial statements
  - Unlike the nursing home program, these are not filed directly by auditor through REAC system
- 10. Perform annual physical inspections
  - Hospital program does not use HUD's Physical Assessment on-line system
  - Physical inspection must be submitted in hard-copy format to the AE

### Preventing a Default and Insurance Claim

- What to watch for:
  - Look for signs of problems early on
    - Are payments being made later each month?
    - Are there mechanic's liens on the title reports?
    - Are there staff changes?
    - Have they stopped investing in PP&E?
- Steps to take:
  - Review periodic financial statements, compare to budget
  - TALK with the Hospital REGULARLY
  - TALK with your Account Executive REGULARLY



# Preventing a Default and Insurance Claim (cont'd)

- When it looks like a default is imminent:
  - Look at the "Other Assets." Can they monetize something to stave off a claim?
  - Property outside the mortgage? AR?
  - Can the Board solve the problem? Philanthropy?
  - Will MRF releases hold off a claim until things get better?
  - As a LAST RESORT, consider the 223(a)(7) Program



### Servicer Responsibilities for Late Payments, Defaults, and Claims

- Report late payments through MDDR System AND call Account Executive
- File notice of default, intent to assign on timely basis.
- Take necessary actions on mortgagee side (bond notices, etc.)

\*\*OIHCF knows how to prevent claims. As a Servicer, you MUST work with OIHCF when a loan is taking a turn for the worse.\*\*



### Section 223(a)(7)

 Provides mortgage insurance to refinance existing FHA-insured mortgages in the current portfolio. The objective of the program is to improve economic viability by reducing the mortgage interest rate.



### Section 241

 Provides mortgage insurance for supplemental loans to finance improvements or additions for FHA-insured properties to keep properties competitive and extend economic life



#### **Council of Experts**

- To advise the Director and to assist in the management of troubled hospitals.
- Current membership of three consisting of:
  - CPA with extensive experience in the healthcare sector, including experience as partner in a national CPA firm.
  - Physician with extensive experience in the health care sector, including experience as CEO of large hospital system.
  - Healthcare executive with extensive experience as senior manager of large hospitals and hospital system.



### **QUESTIONS?**

